

<u>COUNTRY</u>	<u>APPLICATION NO.</u>	<u>DATE OF FILING</u>
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**ALL FOREIGN APPLICATIONS, IF ANY, FILED PRIOR  
TO THE APPLICATION(S) OF WHICH PRIORITY IS CLAIMED**

<u>COUNTRY</u>	<u>APPLICATION NO.</u>	<u>DATE OF FILING</u>
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**POWER OF ATTORNEY:**

As a named inventor, I hereby appoint the following attorney(s) and/or agents(s) to prosecute this application and transact all business in the Patent and Trademark office connected therewith: Gordon D. Coplein #19,165, William F. Dudine, Jr. #20,569, Michael J. Sweedler #19,937, S. Peter Ludwig #25,351, Paul Fields #20,298, Marc S. Gross #19,614, Joseph B. Lerch #26,936, Melvin C. Garner #26,272, Ethan Horwitz #27,646, Beverly B. Goodwin #28,417, Adda C. Gogoris #29,714, Martin E. Goldstein #20,869, Bert J. Lewen #19,407, Henry Sternberg #22,408, Peter C. Schechter #31,662, Robert Schaffer #31,194, Robert C. Sullivan, Jr. #30,499, Ira J. Levy #35,587, Joseph R. Robinson #33,448, Scott G. Lindvall #40,325

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New York, NY 10022

212-527-7700

**FULL NAME AND RESIDENCE OF INVENTOR 1**

LAST NAME: Jensen	FIRST NAME: Jens	MIDDLE NAME:
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CITY: Yonkers	STATE OR FOREIGN COUNTRY: New York	COUNTRY OF CITIZENSHIP: USA
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POST OFFICE ADDRESS: 52 Yonkers Terrace	CITY: Yonkers	STATE OR COUNTRY: NY	ZIP CODE: 10704
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**FULL NAME AND RESIDENCE OF INVENTOR 2**

LAST NAME:	FIRST NAME:	MIDDLE NAME:
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CITY:	STATE OR FOREIGN COUNTRY:	COUNTRY OF CITIZENSHIP:
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POST OFFICE ADDRESS:	CITY:	STATE OR COUNTRY:	ZIP CODE:
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FULL NAME AND RESIDENCE OF INVENTOR 3

LAST NAME:

FIRST NAME:

MIDDLE NAME:

CITY:

STATE OR FOREIGN COUNTRY:

COUNTRY OF CITIZENSHIP:

POST OFFICE ADDRESS:

CITY:

STATE OR COUNTRY: ZIP  
CODE:

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 1:

Gen German ✓

DATED:

11/29/00

SIGNATURE OF INVENTOR 2:

\_\_\_\_\_

DATED:

\_\_\_\_\_

SIGNATURE OF INVENTOR 3:

\_\_\_\_\_

DATED:

\_\_\_\_\_

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re the Application or Patent of:

Docket No. 5986/OH648

Serial or Patent No TO BE ASSIGNED

Filed: CONCURRENTLY  
HEREWITH

For: Methods For Optimizing Magnetic Resonance Imaging Systems

**VERIFIED STATEMENT CLAIMING SMALL ENTITY STATUS  
NONPROFIT ORGANIZATION**

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

NAME OF ORGANIZATION: NEW YORK UNIVERSITY

ADDRESS OF ORGANIZATION: 70 Washington Square, New York, New York 10012

**TYPE OF ORGANIZATION**

- ☒ University or other institution of higher education  
☐ Tax exempt under Internal Revenue Service Code (26 U.S.C. §501(a) and 501(c)(3))  
☐ Nonprofit scientific or educational under statute of state of the United States of America  
(name of state: )  
(citation of statute: )  
☐ Would qualify as tax exempt under Internal Revenue Service Code (26 U.S.C. §501(a) and 501(c)(3)) if located in the United States of America  
☐ Would qualify as nonprofit scientific or educational under statute of state of the United States of America if located in the United States of America  
(name of state: )  
(citation of statute: )

I hereby declare that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 C.F.R. §1.9(e) for purposes of paying reduced fees under Section 41(a) or (b) of Title 35, United States Code with regard to the above-entitled invention by inventor(s) described in

- ☒ the attached specification  
☐ application Serial No. \_\_\_\_\_, filed \_\_\_\_\_

I hereby declare that rights under contract or law have been conveyed to and remain with the nonprofit organization with regard to the above-identified invention.

If the rights held by the nonprofit organization are not exclusive, each individual, concern or organization having rights to the invention is listed below\* and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 C.F.R. §1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 C.F.R. §1.9(d) or a nonprofit organization under 37 C.F.R. §1.9(e).

NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 C.F.R. §1.27)

FULL NAME:

ADDRESS:

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☒ NONPROFIT  
ORGANIZATION

09/09/2000 14:00

FULL NAME:

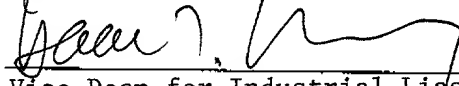
ADDRESS:

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT  
ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate (37 C.F.R. §1.28(b)).

I HEREBY DECLARE THAT ALL STATEMENTS MADE HEREIN OF MY OWN KNOWLEDGE ARE TRUE AND THAT ALL STATEMENTS MADE ON INFORMATION AND BELIEF ARE BELIEVED TO BE TRUE; AND FURTHER THAT THESE STATEMENTS WERE MADE WITH THE KNOWLEDGE THAT WILLFUL FALSE STATEMENTS AND THE LIKE SO MADE ARE PUNISHABLE BY FINE OR IMPRISONMENT, OR BOTH, UNDER SECTION 1001 OF TITLE 18 OF THE UNITED STATES CODE, AND THAT SUCH WILLFUL FALSE STATEMENTS MAY JEOPARDIZE THE VALIDITY OF THE APPLICATION, ANY PATENT ISSUING THEREON, OR ANY PATENT TO WHICH THIS VERIFIED STATEMENT IS DIRECTED.

Name of Person Signing:



Isaac T. Kohlberg

Title in Organization:

Vice Dean for Industrial Liason & Research Administration

Address of Person Signing:

550 First Avenue, New York, NY 10016

Signature. \_\_\_\_\_

Date: November 17, 2000

NONPROFIT ORGANIZATION

REV 12/87